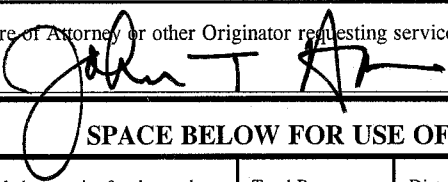




Case 2:07-cv-00429-WHA-WC Document 3
U.S. Department of Justice
United States Marshals Service

Filed 06/08/2007 Page 1 of 1
PROCESS RECEIPT AND RETURN
See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form

③

PLAINTIFF UNITED STATES OF AMERICA				COURT CASE NUMBER 2:07CV429-WHA	
DEFENDANT \$153,290 DOLLARS & \$3,880 DOLLARS IN UNITED STATES CURRENCY				TYPE OF PROCESS COMPLAINT and WARRANT	
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN LONNIE R. KNOWLES - ATTORNEY AT LAW MAY 29 P 1:31				
	ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code) 1314 TEXAS AVENUE, SUITE 1508 - HOUSTON, TEXAS 77002				
SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW:				Number of process to be served with this Form - 285	2
John T. Harmon United States Attorney's Office Assistant United States Attorney Post Office Box 197 Montgomery, Alabama 36101-0197				Number of parties to be served in this case	
				Check for service on U.S.A.	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service) 07-DEA-477293 + 07-DEA-477347					
Signature of Attorney or other Originator requesting service on behalf of: 				<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER (334) 223-7280
DATE 5/15/07					
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE					
I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process No. _____	District of Origin No. <u>2</u>	District to Serve No. <u>2</u>	Signature of Authorized USMS Deputy or Clerk 	Date 5/17/07
I hereby certify and return that I <input checked="" type="checkbox"/> have personally served, <input type="checkbox"/> have legal evidence of service, <input type="checkbox"/> have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.					
<input type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below).					
Name and title of individual served (If not shown above).				<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.	
Address (complete only if different than shown above)				Date of Service 5/24/07	Time 11:18 am
				Signature of U.S. Marshal or Deputy  DUSM	
Service Fee 45.00	Total Mileage Charges (including endeavors)	Forwarding Fee 8.00	Total Charges 53.00	Advance Deposits	Amount Owed to US Marshal or Amount or Refund

REMARKS:

5/18/07 FWD to S/TX for service
RETURNED AND FILED

JUN - 8 2007

2007 MAY 24 PM 3:55

PRIOR EDITIONS MAY
BE USED

CLERK
U. S. DISTRICT COURT
MIDDLE DIST. OF ALA.

FORM USM 285 (Rev. 12/15/80)